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<b>Application Number</b>	10/586,420
<b>Filing Date</b>	07/19/2006
<b>First Named Inventor</b>	Van Eis et al.
<b>Title</b>	Indolylmaleimide Derivatives
<b>Art Unit</b>	
<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	NOV-05-US

I hereby revoke all previous powers of attorney given in the above-identified application.

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Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_.

**SIGNATURE of Applicant or Assignee of Record**

Signature

Date

Name

Telephone

Title and Company

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.

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